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## BIB DATA SHEET

CONFIRMATION NO. 1007

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/693,833	10/24/2003	604	3762	8707-2165	
<b>RULE</b>					
<b>APPLICANTS</b> Marcel Limousin, Paris, FRANCE; Guido Gaggini, Milano, ITALY;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b> FRANCE 02 13356 10/25/2002					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/28/2004					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /ALYSSA MARGO Acknowledged ALTER/ Examiner's Signature	<input type="checkbox"/> Met after Allowance  Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> Orrick, Herrington & Sutcliffe LLP 666 Fifth Avenue New York, NY 10103 UNITED STATES					
<b>TITLE</b> Management of respiratory pauses of hypopnea in an active implantable medical device of the cardiac pacemaker, defibrillator, cardiovertor or multisite device type					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	